



POTENTIAL HAZARDOUS WASTE SITE
IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION 6 SITE NUMBER (to be assigned by Hq) LA 1317

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (Preliminary Assessment). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME DELTA IRON WORKS		B. STREET (or other identifier) INDUSTRIAL BLVD.	
C. CITY HOUMA	D. STATE LA	E. ZIP CODE 70360	F. COUNTY NAME TERREBONNE
G. OWNER/OPERATOR (if known) 1. NAME		2. TELEPHONE NUMBER	
H. TYPE OF OWNERSHIP <input type="checkbox"/> 1. FEDERAL <input type="checkbox"/> 2. STATE <input type="checkbox"/> 3. COUNTY <input type="checkbox"/> 4. MUNICIPAL <input type="checkbox"/> 5. PRIVATE <input type="checkbox"/> 6. UNKNOWN			
I. SITE DESCRIPTION			
J. HOW IDENTIFIED (i.e., citizen's complaints, OSHA citations, etc.)			K. DATE IDENTIFIED (mo., day, & yr.)
L. PRINCIPAL STATE CONTACT 1. NAME BILL HUGHES		2. TELEPHONE NUMBER 504-342-1227	

II. PRELIMINARY ASSESSMENT (complete this section last)

A. APPARENT SERIOUSNESS OF PROBLEM <input type="checkbox"/> 1. HIGH <input type="checkbox"/> 2. MEDIUM <input type="checkbox"/> 3. LOW <input type="checkbox"/> 4. NONE <input type="checkbox"/> 5. UNKNOWN			
B. RECOMMENDATION <input type="checkbox"/> 1. NO ACTION NEEDED (no hazard) <input type="checkbox"/> 2. IMMEDIATE SITE INSPECTION NEEDED a. TENTATIVELY SCHEDULED FOR: b. WILL BE PERFORMED BY: <input type="checkbox"/> 3. SITE INSPECTION NEEDED a. TENTATIVELY SCHEDULED FOR: b. WILL BE PERFORMED BY: <input type="checkbox"/> 4. SITE INSPECTION NEEDED (low priority)			
C. PREPARER INFORMATION 1. NAME 2. TELEPHONE NUMBER 3. DATE (mo., day, & yr.)			

III. SITE INFORMATION

A. SITE STATUS <input type="checkbox"/> 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.) <input type="checkbox"/> 2. INACTIVE (Those sites which no longer receive wastes.) <input type="checkbox"/> 3. OTHER (specify):		
B. IS GENERATOR ON SITE? <input type="checkbox"/> 1. NO <input type="checkbox"/> 2. YES (specify generator's four-digit SIC Code):		
C. AREA OF SITE (in acres)	D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES 1. LATITUDE (deg.-min.-sec.) 2. LONGITUDE (deg.-min.-sec.)	
E. ARE THERE BUILDINGS ON THE SITE? <input type="checkbox"/> 1. NO <input type="checkbox"/> 2. YES (specify):		

9418078



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VII. PERMIT INFORMATION

A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.

NO

- ☐ 1. NPDES PERMIT ☐ 2. SPCC PLAN ☐ 3. STATE PERMIT (specify): _____
☐ 4. AIR PERMITS ☐ 5. LOCAL PERMIT ☐ 6. RCRA TRANSPORTER
☐ 7. RCRA STORER ☐ 8. RCRA TREATER ☐ 9. RCRA DISPOSER
☐ 10. OTHER (specify): _____

B. IN COMPLIANCE?

- ☐ 1. YES ☐ 2. NO ☐ 3. UNKNOWN

4. WITH RESPECT TO (list regulation name & number): _____

VIII. PAST REGULATORY ACTIONS

- ☐ A. NONE ☐ B. YES (summarize below)

IX. INSPECTION ACTIVITY (past or on-going)

- ☐ A. NONE ☐ B. YES (complete items 1, 2, 3, & 4 below)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION

X. REMEDIAL ACTIVITY (past or on-going)

- ☐ A. NONE ☐ B. YES (complete items 1, 2, 3, & 4 below)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION

NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment (Section II) information on the first page of this form.

- WAPORA FILE 'D'

- STATE OF LOUISIANA HAS NO FILE UNDER THEIR

"SOLID WASTE MANAGEMENT PRACTICES" SURVEY (6/4/80)

Delta Construction Co. ?

HOUMA TELEPHONE DIRECTORY

Div. of Chromalloy Natural Resources

Industrial Blvd (E) 868-7240

Delta Fabrication ?

7430

Div. of Chromalloy Natural Resources

Delta Weld & Change Company ?

Delta Signage ?

Div. of Chromalloy Natural Resources

1. COST CENTER EP152-6	TECHNICAL DIRECTION DOCUMENT (TDD) UNCONTROLLED HAZARDOUS WASTE SITE PROJECT ecology and environment, inc.			2. No. <u>F-6-8101-27</u>
3. Priority: <input type="checkbox"/> High <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Low	4. Authorized Overtime <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5. EPA Site Identification Number <u>LA01317</u>	6. Completion Date: <u>3-31-81</u>	7. Reference Info: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Attached <input type="checkbox"/> Pick Up
8. General Task Description: <u>Conduct reconnaissance inspection at Delta Iron Works, Industrial Blvd. in Houma, Louisiana. Collect samples of any runoff / leachate from site.</u>				
9. Specific Elements: <u>FIT representative must:</u> - notify appropriate state agencies & facility representative - complete PA - complete T2070-3 with applicable supplemental forms, if necessary - indicate necessity & priority of on-site sampling inspection & suggest locations for sampling - photograph to document site conditions - immediately notify DPO of O311 violations			10. Interim Deadlines <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	
11. Desired Report Form: Formal Report <input checked="" type="checkbox"/> Letter Report <input type="checkbox"/> Formal Briefing <input type="checkbox"/> Other (Specify): _____				
12. COMMENTS: _____ _____ _____				
13. Authorizing DPO: <u>Charles L. Gayda</u> (Signature)			14. Date: <u>1/12/81</u>	
15. Received By: <input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Accepted with exceptions <input type="checkbox"/> Rejected <u>R. J. Malone</u> (FITL Signature)			16. Date: <u>1/15/81</u>	

Exceptions Comments From (15)